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<h1>TRANSMITTAL FORM</h1> <p><i>(to be used for all correspondence after initial filing)</i></p>		Application Number	09703196
		Filing Date	10/31/2000
		First Named Inventor	Roberts
		Art Unit	2127
		Examiner Name	Banankhah
Total Number of Pages in This Submission	3	Attorney Docket Number	SABLE-01010

ENCLOSURES (Check all that apply)																		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <p style="text-align: center;">PTO/SB/96</p>																
Remarks																		
<p style="text-align: center;">SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</p> <table border="1" style="width: 100%;"> <tr> <td>Firm Name</td> <td colspan="3">West & Associates, A PC</td> </tr> <tr> <td>Signature</td> <td colspan="3">/Stuart J. West/</td> </tr> <tr> <td>Printed name</td> <td colspan="3">Stuart J. West</td> </tr> <tr> <td>Date</td> <td>09/18/2008</td> <td>Reg. No.</td> <td>43,258</td> </tr> </table>			Firm Name	West & Associates, A PC			Signature	/Stuart J. West/			Printed name	Stuart J. West			Date	09/18/2008	Reg. No.	43,258
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